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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form P 10-875

Application of Dihedral Numbers

Indication of Ticket Number
10/079426

CLAIMS AS FILED - PART I

(Column 1) : (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT	(37 CFR 1.16(d))	

* If the difference in column 1 is less than zero, enter '0' in column 2

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	Fee		RATE	Fee
	\$ _____	OR		\$ _____
X \$ _____ =		OR	X \$ _____ =	
X \$ _____ =		OR	X \$ _____ =	
\$ _____ =		OR	\$ _____ =	
TOTAL		OR	TOTAL	

CLAIMS AS AMENDED – PART II

12-20-96 (Column 1) (Column 2) (Column 3)

AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	TOTAL (37 CFR 1.16(e)(1))	Minus <i>34</i>	Minus <i>6</i>	= <i>32</i>	= <i>2</i>
Independent					
(37 CFR 1.16(e)(1))					

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(g)(1))

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
3.5	=		3.5	<u>50</u>
3.5	=		3.5	<u>200</u>
4.5	=		4.5	<u>400.00</u>
TOTAL ADDITIONAL FEE			TOTAL ADDITIONAL FEE	
			<u>500.00</u>	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESERVE EXTRA
Total of claims filed	Plus	**	
Independent claims filed	Minus	***	-

FIRST-PICTURE STIMULUS-OUTCOME DEPENDENT CUES (S-O-C) 109

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
\$ 3.00		\$ 3.00	
\$ 3.00		\$ 3.00	
\$ 3.00		\$ 3.00	
TOTAL ADJUSTED		TOTAL ADJUSTED	

		(Column 1)		(Column 2)	(Column 3)
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESIDENTIAL EXTRA
Total	(37 Cols 1-60)		Minus	**	+
Independent	(37 Cols 1-60)		Minus	***	-

If the entry in column 1 is less than the entry in column 2, write 0 in column 1; if the entry in column 1 is greater than or equal to the entry in column 2, write 1 in column 1.

On the Cholera Outbreak Prevalence Data of the 1851-1854 Epidemic, 1854-1856

The highest number diversity and coverage (PAPC) is seen in very early life, followed by a gradual decline.

The Highest Number Previously Paid for Total or Independence is the highest number found in the aggregate box in column 1.

The collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to be paid by the PTO under 35 U.S.C. 373 and 37 CFR 1.16. This collection of information is mandatory to complete processing, preparing, and reviewing the completed application before the PTO. Each section, question, or statement of this form is self-explanatory. Depending upon the individual case, this document may consist of one page up to complete this form and its supplements for continuing the action should be sent to the Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1650, Washington, D.C. 20530-1650, or to the Director of the Office of Patent, P.O. Box 1650, Washington, D.C. 20530-1650.